

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09/720326	FILING DATE	
							APPLICANT		
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1	1						51		
2		1					52		
3							53		
4		1					54		
5		2					55		
6		2					56		
7		2					57		
8		1					58		
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46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	1		2				TOTAL IND.		
TOTAL DEP.	10	5	17	5			TOTAL DEP.		28
TOTAL CLAIMS	11		19				TOTAL CLAIMS		30

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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U.S. DEPARTMENT OF COMMERCE
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FORM PTO-1280 (REV. 3-73)

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